PART B - FEE(S) TRANSMITTAL

SEP 2 6 2005 mplete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

			or <u>Fax</u>	_ ` ′				
INSTRUCTIONS: This for appropriate. All further con indicated unless corrected I maintenance fee notification	rm should be used for tran respondence including the below or directed otherwise 18.	smitting the ISSU Patent, advance ord in Block 1, by (a)	E FEE and PUI ders and notifica specifying a ne	BLICATION Fl tion of mainten w corresponder	EE (if requestion in the second secon	ired). Blocks 1 through 5 s vill be mailed to the current and/or (b) indicating a sep	should be completed where correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must			
22186 7590 09/09/2005					have its own certificate of mailing or transmission.			
MENDELSOHN AND ASSOCIATES, P.C. 1500 JOHN F. KENNEDY BLVD., SUTIE 405 PHILADELPHIA, PA 19102					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
09/27/2005 WABDELR3 00000052 09922006						Caniz .	(Depositor's name) (Signature)	
01 FC:1501 1400.00 QP				Se	pten		OS (Date)	
APPLICATION NO.	FILING DATE FIRST NAMED INVE			VENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/922,006	08/03/2001	Azzedine Touz				1043.002	6899	
FITLE OF INVENTION: CARRIER PHASE ESTIMATION BASED ON SINGLE-AXIS O					ODULUS			
		a .				1		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES \$1400\fm\fm			\$0		\$1400\$290	12/09/2005	
EXAMINER ART U			IT CLASS-SUBCLASS					
WANG, TED M 2634			375-326000					
1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT (pr	int or type)				
PLEASE NOTE: Unless		elow, no assignee o	lata will appear	on the natent	If an assigr ment.	nee is identified below, the	document has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
AT# Research, Inc.				Santa	Clara	a, California	a USA	
Please check the appropriate	assignee category or catego	ries (will not be pri	nted on the pater	t): 🔲 Indivi	idual 🔯 C	orporation or other private gr	roup entity Government	
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):								
Issue Fee ☐ A check in the arr								
				credit card. Form PTO-2038 is attached.				
Advance Order - # of	Copies		Deposit Accoun	Number5	0-078	harge the required fee(s), or 2 (enclose an extra	credit any overpayment, to copy of this form).	
	(from status indicated above	•						
	MALL ENTITY status. See					LL ENTITY status. See 37 C		
The Director of the USPTO NOTE: The Issue Fee and Ponterest as shown by the reco	is requested to apply the Issuublication Fee (if required) vords of the United States Pate	ne Fee and Publicat will not be accepted ent and Trademark	ion Fee (if any) of from anyone oth Office.	r to re-apply and the app	ny previousl licant; a reg	y paid issue fee to the applic istered attorney or agent; or t	ation identified above. the assignee or other party in	
Authorized Signature	Date 9/23/60							
Typed or printed name	Registration No. 35,951							
This collection of information application. Confidentialication the completed an	on is required by 37 CFR 1.3 ity is governed by 35 U.S.C.	11. The information 122 and 37 CFR 1	is required to o .14. This collect	otain or retain a ion is estimated the individual	benefit by to take 12	he public which is to file (an minutes to complete, including the amount of the	nd by the USPTO to process) ng gathering, preparing, and ime you require to complete	

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.